

Please type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

2825
#3
IDS
+ 8/24/00

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/536,037
Filing Date	March 27, 2000
First Named Inventor	Weimin Li
Group Art Unit	2825
Examiner Name	Unknown

Total Number of Pages in This Submission

Attorney Docket Number MI22-1398

ENCLOSURES (check all that apply)

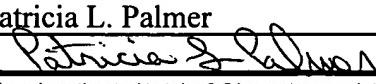
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Form PTO-1449; Copies of cited art; Postcard
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	AUG 17 2000
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	RECEIVED U.S. MAIL ROOM
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks: No Fee Required.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

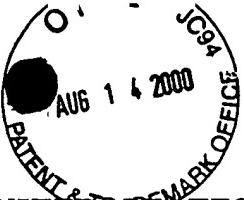
Firm or Individual name	Mark S. Matkin, Reg. No. 32,268 Wells, St. John, Roberts, Gregory & Matkin P.S.
Signature	
Date	8/8/00

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: August 8, 2000

Typed or printed name	Patricia L. Palmer
Signature	
Date	8/8/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



#Z

1 IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

2 Patent Application Serial No. 09/536,037
3 Filing Date March 27, 2000
4 Inventorship Weimin Li et al.
5 Assignee Micron Technology, Inc.
6 Group Art Unit 2825
7 Examiner Unknown
8 Attorney's Docket No. MI22-1398
Title: Low K Interlevel Dielectric Layer Fabrication Methods

9 **SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

10 References -- See Attached Form PTO-1449

11 In compliance with 37 C.F.R. §§ 1.56, 1.97 and 1.98, your
attention is directed to the United States patents and other references
12 listed on the attached Form PTO-1449. No admission is made regarding
whether all the submitted references are prior art.

13 This Information Disclosure Statement is being filed within three
months of the filing date of the application or before the mailing of a
14 first Office Action, whichever occurs last. Therefore, no fee is believed
15 to be required. However, in the event that a fee is required for filing
16 this Information Disclosure Statement, please charge the fee specified
17 under 37 C.F.R. §1.17(p) to Deposit Account No. 23-0925. Please credit
18 Deposit Account No. 23-0925 with any overpayment of the above fee.

19 Respectfully submitted

20 Dated: 8/8/00

21 By:

22
Mark S. Matkin
Reg. No. 32,268

23
RECEIVED
AUG 17 2000
PTO-2800 M4
2000
24